

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-27-01
FORMALITY REVIEW	ms	579	3/9/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1091	2-30-01

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
— .....	Restricted	O .....	Objected

Claim	Original	Date
1	11-3-02	
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Final	Claim	Original	Date
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Claim		Date					
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**If more than 150 claims or 10 actions  
staple additional sheet here**

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